United Nations Volunteers in the Comoros: Part of the Solution

The Comoros: basic facts

Population:	**450,000**
Area:	**2,234 square kilometres**
GNP per capita:	**US$320**
Life expectancy at birth:	**54 years**
Literacy rate:	**50% (estimated)**
Principal exports:	**Vanilla, cloves, ylang-ylang**

A young Comorian boy gathers leaves for food and shelter.

The Comoros is a volcanic archipelago, located between the northern tip of Madagascar and Mozambique. Its spectacular physical environment includes dramatic mountain vistas, tropical rain forests and an aquamarine sea. But the human poverty that exists here is startling in contrast. Safe drinking water is still a luxury. Roughly half the population is illiterate. One out of eight children dies before the age of five — mostly from preventable diseases.

Strapped financially and with few trained personnel, the Comoros has, for over a decade, relied heavily on the services of a small army of United Nations Volunteers. Forty-eight UNV specialists of 18 nationalities are serving in that country today, providing professional services for a period of two to four years as doctors, teachers, agronomists, engineers, pharmacists, lab technicians, and organizers of women and youth.

Safe drinking water is still a luxury in the Comoros.

Foreground: Mensa Kogbetse coordinates the UN Volunteer programme in the Comoros. He comes from Togo where he served for ten years in the Ministry of Planning. Behind him is Oscar Nzorijana, an agronomist from Burundi, who is working with extension workers on the island of Mohéli to improve crop production. Mr. Nzorijana has seen big improvements in agriculture over the four years he has served on the island. He now looks forward to sharing his experiences in other developing countries.

READEX

A Comorian mother brings her child to the health clinic at Ouzioini, on the main island of Grand Comore.

The Comoros was first settled in the sixth century, and is today a mixture of African, Arab, Persian and Malagasy peoples. Each of the three main islands has retained distinct cultural characteristics. This, along with their remoteness from world markets and the large distances between them, has worked against development efforts. Until recently, inter-island telephone communication was unreliable. Phone contact with the outside world requires routing through Paris, and is possible only several hours each day.

When it declared unilateral independence from France in 1975, the Comoros lost US$18 million in annual subsidies and 500 French technicians. It was left with a subsistence agricultural economy, little infrastructure and a deep need for whatever foreign assistance it could get.

The social and economic problems of the Comoros remain formidable, exacerbated by one of the highest population growth rates in the world. Notwithstanding the added pressure this places on food supplies and basic services, a high population density, especially on the island of Anjouan, has contributed to soil erosion and the stripping of forests. But perhaps the most pressing problem in the Comoros today is a lack of trained personnel and a dearth of job opportunities for the country's growing population of 450,000. "The people of the Comoros have one main idea — and that is to get trained and get out," says Kevin McGrath, Resident Representative of the United Nations Development Programme (UNDP) in the Comoros.

Kethi Maw-Naing came to the Comoros from Myanmar. As a doctor and a UN Volunteer, Dr. Maw-Naing expects challenges. But none of her past experiences prepared her for the Comoros. Dr. Maw-Naing lives alone in Ouzioini, on the main island of Grand Comore, the only doctor for 18 surrounding villages. It is not the isolation she minds so much, or adjusting to life in another culture for the first time. It is the fact that she is often without the means to help the people she is there for.

One day recently, Dr. Maw-Naing made her monthly visit to Nkourani-Sima, a remote mountain village inaccessible by road, to administer vaccinations supplied by the UN Children's Fund. A sea of villagers gather around the "health post," a small, dark, two-room structure equipped with a table and several chairs. Many are mothers with their infants. Others wait, hoping to see her for their ailments, hoping that her small supply of medicines will be enough to go around.

Dr. Maw-Naing receives medical supplies once a month. They are never enough. She describes how one child, with a high temperature from malaria, developed convulsions because there was no aspirin to bring down the fever. "Another woman was in labour and in a state of shock, but we had no serum or medicines to treat her, and no petrol to drive her to the nearest hospital in Moroni." Others suffer from asthma. But they are reluctant to make the long journey by foot down the mountain to the health centre in Ouzioini, where there may or may not be medicine, for fear that they will not be able to make it back.

"When I first arrived I was shocked," says Dr. Maw-Naing, "because there were simply no drugs, nothing." Her village has periodic electricity — when there is enough petrol for a generator — and no running water. Nevertheless, she is buoyed by the energy of Ouzioini's people, who have built their own roads and health centre, and are currently seeking help to set up their own village pharmacy and lab. "Women of the village are now coming to see me for instructions in cooking and sewing, and advice on family planning," says Dr. Maw-Naing.

Kethi Maw-Naing administers vaccinations supplied by UNICEF in the remote mountain village of Nkourani-Sima.

Hasengua Guo, from Inner Mongolia in China, is a gynecologist. She previously worked with a Chinese medical team in Rwanda, and has established excellent relations with local women in the town of Domoni, who now come to her for advice about nutrition and family planning. *Below:* Originally from Rwanda, Laurent Munyankindi is a UNV obstetrician and gynecologist.

Marie-Yvonne Ranaivoarisoa is a 32-year-old doctor who worked in neurosurgery in a large hospital in Madagascar. When she first arrived as a UNV specialist on the island of Mohéli, the least developed of the Comorian islands, she was assigned to the village of Nioumachoua, which is an hour's drive from the main town of Fomboni when the roads are passable. The house that the Government was preparing for her was still unfinished, and without running water or electricity. The structure that served as a health centre was equipped with only a few metal bedframes. There were no mattresses.

Dr. Ranaivoarisoa says she came to Comoros to "do something entirely for other people — at least once in my life." Now working in the hospital of Fomboni, she sees about 40 patients a day as the only general practitioner for the island, which has a population of 20,000. She feels "that a very important human and cultural exchange is taking place." She is also positive about her stay in the professional sense because of the great range of experiences she has had here. "Still," she says, as she hands over a carefully prepared list of drugs that the hospital is without, "sometimes I feel as if I am all alone in caring."

Marie-Yvonne Ranaivoarisoa is the only general practitioner on Mohéli island.

***Left and far left*: Volunteer Kalasa Muta, from Zaire, teaches sewing at *Ecoles Ménagères "Les Hirondelles,"* vocational training schools set up by three Comorian women to provide options for young female dropouts and divorcees. With support from the UN Volunteers, the UN Development Fund for Women and other donors, "household" schools are being developed on two islands, offering classes in sewing and embroidery, literacy, modern farming techniques, nutrition and family planning.**

Joseph Desiré Rakotovao is a youth director from Madagascar. "In the Comoros," he says, "where 57 per cent of the population is under the age of 20, getting young people involved in the development process is one of the Government's major concerns."

David Koutangni, from Benin, works with the World Food Programme in tree planting schemes and the diversification of food crops on the island of Anjouan, where forests have shrunk by 73 per cent over the last decade.

"Over the years, the contribution of the UNV specialists has been deeply appreciated by the Government and the people of the Comoros," says Mr. McGrath, who co-ordinates all UN development activities in that country. "But we are still faced with the fact that there are not enough professionals to go around, nor the funds to buy the supplies and equipment that will enable them to do their job effectively."

In tandem with its grassroots volunteer activities, UNDP is working with the Comorian Government at the macro-economic level to put the country back on track. "This begins with tackling the population question," says Mr. McGrath, "and developing a viable agricultural strategy that takes into account deforestation and soil erosion."

At the same time, the Comoros is embarking on a new structural adjustment programme to bolster its development prospects over the longer term. With the help of the World Bank, actions are being taken to improve the educational system and to upgrade the quality of Comorian teachers. Within the health manpower strategy, 40 Comorian doctors, currently being trained through fellowships from UNDP and the World Health Organization, are scheduled to return to Comoros. "Overall success hinges on creating a climate where Comorians will be trained and will stay," says Mr. McGrath. "Until we see big changes here, the volunteer programme in health will be primarily a stop-gap solution. But at the moment, it is the only solution we have."

Lawson Barthelemy, a doctor from Togo, works in the remote village of Sima on the island of Anjouan. His clinic has no laboratory for routine tests, no equipment to sterilize needles, and no water for six months of the year. When the generator is working, there is electricity for four hours a day. His monthly supply of essential drugs, dispensed by the regional pharmacy, lasts about two weeks. He is often without a functioning vehicle or means of communication, and the clinic's ambulance can't be used for lack of spare parts.

Yvonne Razafinjato, a UNV specialist from Madagascar, teaches management and administration at *Les Ecoles Hirondelles*.

The UN Volunteer programme is now seeking US$6.6 million from governments, international organizations, private voluntary groups and individuals to improve health services for the people of the Comoros. The funds will be used to recruit 25 UNV specialists a year for the period 1991 through 1996, and to give the volunteers the tools they need to do their job even more effectively.

Where your funds will go, 1991–1996*

For use and control by UNV doctors: emergency medical kits, surgical instrument kits, basic equipment and supplies, essential drugs, vitamins, antibiotics, syringe sterilizers, etc.

Vehicles for 8 district health centres and one hospital, including spare parts and operating costs

25 UNV specialists a year in the health sector, including administrative support

***Contributions in kind are also welcome. A detailed breakdown of required support is available upon request.**

The United Nations Volunteers are our front line crusaders, living and working with the poorest of the poor. With skills and experience and a minimum of overhead, they are teaching and training, monitoring and managing, inspiring and motivating all over the globe. They are clearly making the difference."

William H. Draper III
UNDP Administrator

Saikou Barry, from Guinea, teaches secondary school mathematics on the island of Mohéli. "Every African society is different," he says, "and we must take time to understand them."

Frank Martinet, a UNV specialist from Belgium, came to the Comoros to help set up the country's first medical laboratory on the main island of Grand Comore. Because it is heavily supported by the Government of France, the laboratory at the El Maroof Hospital is well equipped, and Mr. Martinet is able to spend a good deal of his time training Comorian technicians. He hopes to continue his work in Africa, partly out of altruism and partly because of the wide range of experiences it offers. "In the field of bacteriology, at least, I have seen more here than I would in my entire career in Europe. But I also feel that I am having a direct impact on people's lives."

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For more information about how you can contribute to the work of the UN Volunteers in the Comoros, please contact:

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